

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		6	9-26-00
FORMALITY REVIEW	(BD)		
RESPONSE FORMALITY REVIEW			10-5-2000

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Date
Final	20
Original	1st
1	✓
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12	✓
13	0
14	0
15	0
16	0
17	0
18	✓
19	1
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22	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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